

SEP 07 2004

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)

Applicant(s): Robert A. Weiss, et al.

Docket No.

UST-0019

Application No.

10/054,021

Filing Date

November 13, 2001

Examiner

K. Jolley

Group Art Unit

1762

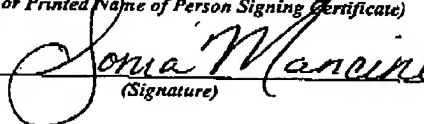
Invention: CONDUCTIVE ELASTOMERIC FOAMS AND METHOD OF MANUFACTURE THEREOF

I hereby certify that this Amendment Transmittal Letter (1 pg), Response (10 pgs) & Article (4 pgs)
(Identify type of correspondence)is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. (703) 872-9306)on September 7, 2004



(Date)

Sonia Mancini

(Typed or Printed Name of Person Signing Certificate)


(Signature)

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AMENDMENT TRANSMITTAL LETTER (Small Entity)					Docket No. UCT-0019	
Applicant(s): Robert A. Weiss, et al.						
Application No. 10/054,021	Filing Date November 13, 2001	Examiner K. Jolley	Customer No. 23413	Group Art Unit 1762	Confirmation No. 1427	
Invention: CONDUCTIVE ELASTOMERIC FOAMS AND METHOD OF MANUFACTURE THEREOF						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application.						
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27						
RECEIVED CENTRAL FAX CENTER SEP 07 2004						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	20 -	21 =	0 x	\$9.00	\$0.00	
INDEP. CLAIMS	3 -	3 =	0 x	\$43.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 06-1130 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 Signature			Dated: September 7, 2004			
Leah M. Reimer Registration No. 39,341 Customer No. 23413 (860) 286-2929			<div style="border: 1px solid black; padding: 5px;"> I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on September 7, 2004. (Date)  Signature of Person Mailing Correspondence Sonia Mancini VIA FACSIMILE Typed or Printed Name of Person Mailing Correspondence </div>			
CC:						